



Town of Trumbull Death Certificate-Certified Copy

Deceased Name: _____

Date of Death _____ Date of Birth _____

Town of Death _____

Name of Person Requesting Copy _____ Relationship _____

Address _____

Phone _____

Fee: \$10.00 PER COPY
MAKE CHECK PAYABLE TO
Town of Trumbull

Identification is required, if mailing please send copy of drivers license or photo identification.

Please include a self-addressed stamped envelope.

Mail Request to:

Town Clerk's Office
5866 Main Street
Trumbull, Connecticut 06611

Rose Lodice
Trumbull Town Clerk
203-452-5035